

**UNITED STATES BANKRUPTCY COURT  
CENTRAL DISTRICT OF CALIFORNIA**

Filer's Name: \_\_\_\_\_ Atty Name (if applicable): \_\_\_\_\_

Street Address: \_\_\_\_\_ CA Bar No. (if applicable): \_\_\_\_\_

\_\_\_\_\_ Atty Fax No. (if applicable): \_\_\_\_\_

Filer's Telephone No.: \_\_\_\_\_

In re: _____	Case No.: _____  Chapter 7 _____ 11 _____ 13 _____
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**AMENDED SCHEDULE(S) AND/OR STATEMENT(S)**

A filing fee of \$26.00 is required to amend any or all of Schedules "D" through "F." An addendum mailing list is also required as an attachment if creditors are being added to the creditors list. Is/are creditor(s) being added? Yes \_\_\_\_\_ No \_\_\_\_\_

Indicate below which schedule(s) and/or statement(s) is(are) being amended.

A \_\_\_\_\_ B \_\_\_\_\_ C \_\_\_\_\_ D \_\_\_\_\_ E \_\_\_\_\_ F \_\_\_\_\_ G \_\_\_\_\_ H \_\_\_\_\_ I \_\_\_\_\_ J \_\_\_\_\_

Statement of Social Security Number(s) \_\_\_\_\_ Statement of Financial Affairs \_\_\_\_\_

Statement of Intention \_\_\_\_\_ Other \_\_\_\_\_

**NOTE:** IT IS THE RESPONSIBILITY OF THE DEBTOR TO MAIL COPIES OF ALL AMENDMENTS TO THE TRUSTEE AND TO NOTICE ALL CREDITORS LISTED IN THE AMENDED SCHEDULE(S) AND TO COMPLETE AND FILE WITH THE COURT THE PROOF OF SERVICE ON THE BACK OF THIS PAGE.

I/We, \_\_\_\_\_, the person(s) who subscribed to the foregoing Amended Schedule(s) and/or Statement(s) do hereby declare under penalty of perjury that the foregoing is true and correct.

DATED: \_\_\_\_\_

\_\_\_\_\_  
*Debtor Signature*

\_\_\_\_\_  
*Co-Debtor Signature*

**\*\*FOR COURT USE ONLY\*\***

**\*SEE REVERSE SIDE\***

**PROOF OF SERVICE**

I hereby certify that a copy of the Amendment(s) was(were) mailed to the Trustee and that notice was given to the additional creditors listed.

DATED: \_\_\_\_\_

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
*Signature*

(SEE ATTACHED MAILING LIST.)